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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<i>Complete if Known</i>	
FEES TRANSMITTAL For FY 2009		Application Number	10/519,477-Conf. #2658
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	December 30, 2004
<input type="checkbox"/> TOTAL AMOUNT OF PAYMENT (\$)		First Named Inventor	Hiroaki HAMADA
\$ 670.00		Examiner Name	A. R. Hsu
		Art Unit	2622
		Attorney Docket No.	
		0033-0971PUS1	

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 02-2448				Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below		<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		<input type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	
<input checked="" type="checkbox"/> Credit any overpayments					

FEES CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee Paid (\$)
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							
Each claim over 20 (including Reissues)	Small Entity Fee (\$)						
52	26						
Each independent claim over 3 (including Reissues)	Fee (\$)						
220	110						
Multiple dependent claims	Fee (\$)						
390	195						
Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
13	20 or HP	x	=	Fee (\$)			
HP = highest number of total claims paid for, if greater than 20.							
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
3	3 or HP	x	=				
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)		
- 100 =	/50 =	(round up to a whole number) x		=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1401 Notice of appeal 540.00							
1251 Extension for response within first month 130.00							
SUBMITTED BY							
Signature				Registration No. (Attorney/Agent)	52,327	Telephone (703) 205-8000	
Name (Print/Type)	Catherine M. Voisinet			Date May 8, 2009			